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Apr 06, 1999 8:00 am
Secretary of State

04-06-1999 90081 021 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000093680

1. Corporation Name

A. DLUBAK CORPORATION



Principal Place of Business
1770 EAST LAS OLAS BLVD.
UNIT 503
FORT LAUDERDALE FL

Mailing Address
152 BAKER ROAD
FREEPORT PA 16229

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/04/1998

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21

26

1770 EAST LAS OLAS BLVD # 65-0875863

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22

27

UNIT # 503

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

City & State

City & State

23

28

FORT LAUDERDALE FL

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

24

25

Country

Zip

33301

30

BROWARD

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

F. ANDREWS TANTOR
5051 CASTELLO DRIVE
SUITE 5
NAPLES FL 34103

81 Name

ALYSSA M. DLUBAK

82 Street Address (P.O. Box Number is Not Acceptable)

1770 EAST LAS OLAS BLVD

83

UNIT # 503

84 City

FORT LAUDERDALE FL

85 Zip Code

33301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.1505, Florida Statutes.

SIGNATURE

Alyssa M. Dlubak

(NOTE: Registered Agent signature required when reinstating)

DATE

3/5/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME DLUBAK, ALYSSA M
STREET ADDRESS 152 BAKER ROAD
CITY-ST-ZIP FREEPORT PA 16229

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

P/S/D
DLUBAK, ALYSSA M
1770 EAST LAS OLAS BLVD, UNIT # 503
FT. LAUDERDALE, FL 33301

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

DATE

3/5/99

DAYTIME PHONE #

954-467-2990

CR2034 (11/98)